

## ATTORNEY DOCKET NO. PROG.003.00USRe

## D STATES PATENT AND TRADEMARK OFFICE

In Reissue Application of: Emerson et al.	) Examiner: Levy, N.
Reissue Serial No.: 08/977,644	) Art Unit: 1615
Filed: November 24, 1997	)
Title: USE OF AROMATIC ALDEHYDES AS INSECTICIDES AND FOR KILLING ARACHNIDS	) ) TRANSMITTAL LETTER ) )
	RECEIVED
Assistant Commissioner for Patents	NOV 3 1999

Washington, D.C. 20231

**TECH CENTER 1600/2900** 

Sir:

Transmitted herewith are the following documents in the above-identified application.

- Supplemental Paper to Reissue Application. [X]
- Copy of Cut-up Patent. [X]
- Return postcard (postage prepaid). [X]

The fees have been calculated as shown below:

				<u>Sr</u>	mall	Entity	L	arge	Entity
<u>Claims</u>	Remain after Amend	Highest No. Prev. Paid	Pres. <u>Extra</u>	<u>Rate</u>		<u>Fee</u>	Rate		<u>Fee</u>
Total:				x \$9	=	\$	x \$18	=	\$
Indep:				x \$39	=	\$	x \$78	=	\$

## CERTIFICATE OF FIRST CLASS MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231

Printed Name: LM

entity) \$260 (large entity).

Total Additional Claims Fee:								
		Small Entity	Large Entity					
Ext	ension of Time Fee							
[]	One Month	\$ 55	\$ 110					
[]	Two Months	\$190	\$ 380					
[]	Three Months	\$435	\$ 870					
[]	Four Months	\$680	\$1360					
[]	Five Months	\$925	\$1850					
			REC	EIVED				
	nsion of Time Fee		NOV	3 1999 <sup>\$</sup>				
Other	fees (list individually):		TECH CENT	TER 1600/2900				
Total	Other Fees:			\$				
			TOTAL	FEES: \$				
[]	A check including the	amount of the above-ind	icated TOTAL FEES is attache	d.				
[]	Please charge Deposit Account No. 18-0020 in the amount of \$							
[]	A check in the amount of \$ is attached.							
[X]	No fee is required.							
[X]	Conditional Petition for Extension of Time: An extension of time is requested in the							
	present and/or the abo	ove-referenced parent app	lication to provide for timely fi	ling <u>if</u> an				
	extension of time is st	ill required after all paper	s filed with this transmittal hav	e been				
	considered.							
[X]	The Commissioner is	hereby authorized to char	ge any underpayment of the fo	llowing				
	fees associated with this communication, including any necessary fees for extension of							
	time, or credit any overpayment to Deposit Account No. 18-0020.							
	[X] Any filing fees under 37 CFR 1.16 including fees for the presentation of extra							
	claims.							
	[X] Any parent app	olication processing fees u	ander 37 CFR 1.17.					

[X] A duplicate copy of this sheet is attached for accounting purposes.

Respectfully submitted,

Date: October 25, 1999

Barbara Rae-Venter, Ph.D. Reg. No. 32,750

Rae-Venter Law Group, P.C.

P. O. Box 60039

Palo Alto, CA 94306

Telephone: (650) 328-4400 Facsimile: (650) 328-4477

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